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COUNTY OF ANGLESEY



ANNUAL REPORT

OF THE

Medical Officer of Health
For the year 1960

G. WYNNE GRIFFITH, M.D., D.P.H.

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To :

The Chairman and Members of the Health Committee

Mr. Chairman, My Lord, Ladies and Gentlemen,

I have the honour to present the forty-ninth annual report of the County Medical Officer of Health, being a report on the health of the county in 1960.

Vital Statistics.

The *population* of the county was estimated at mid-year to be 52,070 compared with 52,300 at mid-year 1959. The *birth rate* was 17.0 per 1,000 population compared with 16.7 last year. The *infant mortality rate* was again below the national figure of 21.9.

There was one *maternal death* in 1960.

The notable feature in the field of *epidemiology* was the county's relative freedom from notifiable diseases.

Re-arrangement of Committees.

With the imminent operation of the Mental Health Act, 1959, it became necessary to establish an *ad hoc* sub-committee of the Health Committee to deal with mental health services. The opportunity was taken to rearrange the work of the main committee and as a consequence the Ambulance Sub-Committee and the Nursing Services Sub-Committee ceased to exist. It was also decided to discontinue the House Committees of the Homes for the Aged. The supervision of the homes was vested in a panel of visitors who, henceforth, will report direct to the Welfare Sub-Committee.

Developments in the Hospital Services.

The needs for different kinds of hospital services have altered considerably in the years that have elapsed since the "appointed day" when the National Health Service came into force.

By 1948, for example, it had already become evident that it would no longer be necessary to maintain a separate "fever" hospital to serve the county. Consequently, one of the first changes to come about was an alteration in the function of the Druid Hospital, Llangefni, which ceased to care for cases of infectious disease.

In 1948 and for several years thereafter, the urgent need was for beds for tuberculosis and during this period the Druid Hospital therefore admitted tuberculosis cases instead of infectious diseases. But tuberculosis fortunately has declined in a remarkable way and for some time now the Druid Hospital has been used increasingly to care for long-stay cases of general medical and surgical conditions. Despite this transfer of beds from tuberculosis to other purposes the waiting list for admission for cases of tuberculosis disappeared three years

ago since when there have been happily more beds available than there are patients waiting to occupy them. The time, we hope, is not far distant when tuberculous disease requiring hospital treatment will be distinctly uncommon. It is obvious therefore that the future use of the remaining tuberculosis hospital in the county—the Sanatorium, Llangefni—should be called in question. The proposals put forward by the Wales Hospital Board based on the trend throughout the whole of the Principality were discussed during the year with the Board's officers and as a consequence the Board was asked to look again at the timing of their proposed changes.

Changes, inevitably, there will be, if recent experience is any guide. New needs will come into prominence and old needs will fade in importance. The public, and the council as representing the public, must be prepared to accept the consequential changes in hospital provision. Quite apart, however, from the changes which will be forced upon us by the altered pattern of disease prevalence the time is coming when new hospitals will need to be built. The position in this county at the present time is that certain kinds of hospital services are provided in (a) a building erected as a "temporary" structure in 1912; (b) a building erected as a "temporary" structure in 1940; (c) an old public assistance institution; (d) a small hospital built many years ago and inadequate by present day standards, and (e) a private dwelling "converted" into a maternity hospital in 1948. The Council pressed upon the Wales Hospital Board the suggestion that in their planning for the future the Board should consider centralizing the services at present provided in the existing Anglesey hospitals in new buildings to be sited in the Holyhead-Valley area. The Council made it clear that this suggestion was not intended in any way to conflict with the known wish of the Board to develop a base hospital at Bangor, the urgent need for which is generally acknowledged.

Housing for Old People.

Old Mrs. Jones is over 80. Alone in the world she lives in the isolated four-roomed house without a piped water supply or indoor sanitation which has been her home for many years. The house is draughty and inclined to be damp. The stairs are steep and narrow and badly lit. She has an open coal fire and a paraffin stove for cooking. Her health is failing and shortly she will probably become bed-ridden. When that day comes she will certainly refuse hospital treatment because she is such a stubborn old lady (or so independent-minded according to one's point of view). Making adequate arrangements to care for her at home, perhaps for months, possibly for years, is going to tax alike the ingenuity of the local authority and the goodwill of any neighbours there may be. The problem she presents is typical of many, each with its variations on a theme of loneliness, isolation and unsuitable housing. In a county such as this, with a higher-than-average proportion of the population in the older age-brackets, and

with hundreds of households each of one person apiece, the problem is acute and likely to get worse in the foreseeable future.

What can be done?

One paramount need for all concerned is to start thinking of the housing of the aged as a preventive measure. It is possible actually to improve the health of elderly people by giving them a dwelling designed, because it meets their special needs, to reduce to a minimum the physical demands made on their failing powers by the business of daily living. It is possible to design a dwelling where the danger of accidents is minimized. It is possible to arrange for houses to be grouped in such a way that companionship and help are at hand when needed.

For some years now the council has been urging the housing authorities to develop special housing for old people, with, hitherto, indifferent success. In the last year or so, however, three district authorities have come forward with applications for joint schemes whereby the County Council as welfare authority will be responsible for certain communal services—a warden, a call-bell system, some form of background heating, guest bedrooms for visitors from a distance, and so on—provided the group is large enough to justify these services being provided. The size specified as a minimum is 16 dwellings and there are several villages in the county all of which in our opinion could easily justify a scheme of that size. As an alternative, to meet the case of those villages where, it is alleged, the number of applicants is likely to fall below the minimum of 16, the Council are prepared to make an annual grant per house for schemes of any size provided the district council at their own expense arrange for the provision of the stipulated services.

Personal.

After twenty-one years' service Mr. William Jones, O.B.E., has retired from being clerk of the County Council. His office entitled him to the position of *primus inter pares*. His personal qualities enabled him to assume that status with quiet authority. His years of office were marked by momentous changes in the life and circumstances of this island county. Those of us, on the Council and on the staff, who had the pleasure and privilege of working with him, know the measure of his contribution.

Dr. Catherine M. Rolant-Thomas retired in 1960 after many years' service as a dental officer. Generations of school children have cause to be grateful for the skill and care with which she did her work. Two district nurses also retired in 1960: Nurse W. M. Roberts and Nurse E. A. Vidler belonged to an older school of nursing and the standards of devotion to duty which they set themselves were high indeed.

Mr. W. H. Austin relinquished his appointment as county water engineer to take a post elsewhere. It is a pleasure to record the co-operation given by Mr. Austin at all times.

The death occurred in 1960 of Miss Margaret Prydderch at the age of ninety. For thirty four years she had been county superintendent of nurses and, reluctantly one imagines, she had to make way in 1948 (she was then 78) for a younger successor when the County Council assumed responsibility for all domiciliary nursing services. She had been enrolled as a Queen's Nurse in 1897 and had had an interesting and varied career before coming to North Wales in 1914.

The death occurred, too, in 1960, of Mr. Harold Lowe, M.Sc., F.R.I.C., who had given many years of faithful service to this county and to many other authorities, as public analyst.

Acknowledgments.

Once again I am glad of the opportunity to bring to your attention the many services rendered by voluntary workers, particularly the voluntary helpers at the infant welfare clinics, the St. John Detachments and the British Red Cross Society.

It is a pleasure, too, to acknowledge the kindness and co-operation shown by the other officers of the council. I am particularly indebted to the Clerk of the Council and his department for assistance and advice frequently sought and readily given. The County Water Engineer (Mr. A. B. Groves), and the Inspector of Food and Drugs (Mr. H. A. Thomas) kindly provided information relating to their departments for inclusion in this report. I am indebted to the district medical officers of health, the assistant county medical officers, the nursing and clerical staff for their loyal co-operation. I welcome, too, the opportunity to thank you, Sir, and the members of the Health Committee, for the interest you have evinced in the work of the department and for the support you have accorded to me at all times.

I am,

Your obedient servant,

G. WYNNE GRIFFITH,

County Medical Officer.

July 1961

GENERAL STATISTICS

Table 1.

<i>District</i>	<i>Area in Acres</i>	<i>*Popula- tion</i>	<i>Rateable Value (1.4.60)</i>
			£
Beaumaris Borough	3,135	2,210	27,608
Amlwch Urban	4,494	3,080	52,754
Holyhead Urban	730	10,370	101,918
Llangefni Urban	2,510	3,000	43,459
Menai Bridge Urban	824	2,090	22,554
Total Urban Districts	11,693	20,750	248,293
Aethwy Rural	52,352	10,520	66,235
Twrcelyn Rural	53,865	8,350	56,768
Valley Rural	58,784	12,450	108,730
Total Rural Districts	165,001	31,320	231,733
Total Administrative County ...	176,694	52,070	480,026

* Registrar General's estimate for mid-year 1960

Product of 1d. rate for County 1960/61 £1,859

METEOROLOGY

Monthly climatological data relating to R.A.F. Establishment, Valley, and supplied by courtesy of the Director General of the Meteorological Office, Air Ministry.

Table 2.

YEAR 1960	RAINFALL		SUNSHINE		TEMPERATURE		FOG
Month	Mean dly. rainfall mms.	No. of Wet Days	Mean dly. hrs. of sunshine	No. of sunny days	Mean Max day Temp.	Mean Min. Night Temp.	No. of days of fog record- ed
January	4.1	18	1.7	3	46	39	1
February ...	3.3	18	3.3	8	45	37	4
March	1.3	8	3.6	7	51	40	3
April	1.9	10	6.9	13	54	43	3
May	1.1	6	7.6	13	61	48	3
June	1.0	4	8.9	13	66	53	5
July	2.5	11	5.8	8	63	54	0
August	1.6	10	6.2	11	64	54	3
September ...	3.3	14	5.1	11	61	51	1
October	4.5	19	3.1	6	57	47	4
November ...	6.1	26	2.0	3	51	44	0
December ...	3.6	16	2.6	7	46	39	3

The main feature of the year was the rather wet summer months, rainfall being high from July to October. The temperature was also somewhat lower in the summer months during 1960 as compared with 1959. Fog was more prevalent.

VITAL STATISTICS

Where possible the comparable rates for England and Wales are shown. For the current year these are provisional figures issued by the Registrar General.

A table will be found at Appendix "D" showing the statistics for the individual county districts.

Births

There were 886 *live births* registered during the year, corresponding to a birth rate of 17.0 per 1,000 population.

The trend of the birth rate over the past 10 years can be seen from table 3, which gives the England and Wales data for comparison.

Table 3.

BIRTH RATE PER 1,000 POPULATION

	Anglesey	England and Wales
1951.....	16.1	15.5
1952.....	17.0	15.3
1953.....	16.1	15.5
1954.....	15.9	15.2
1955.....	15.3	15.0
1956.....	16.0	15.6
1957.....	16.1	16.1
1958.....	16.3	16.4
1959.....	16.7	16.5
1960.....	17.0	17.1

Illegitimate live births accounted for 35 out of the total of 886 live births (or 4.0 per cent. of the total).

The illegitimate birth rate is thus 0.67 per 1,000 population. The trend of the illegitimate birth rate over the past 10 years can be seen from the table set out below, which gives for comparison the corresponding rates for England and Wales.

Table 4.

ILLEGITIMATE BIRTH RATE PER 1,000 POPULATION

	Anglesey	England and Wales
1951.....	0.9	0.7
1952.....	1.2	0.7
1953.....	1.2	0.7
1954.....	0.8	0.7
1955.....	1.0	0.7
1956.....	0.8	0.7
1957.....	0.9	0.8
1958.....	0.7	0.8
1959.....	0.7	0.8
1960.....	0.7	Not available

Stillbirths.

Stillbirths during the year numbered 17, which gives a stillbirth rate of 0.33 per 1,000 population. The corresponding rate for England and Wales was 0.34. To express stillbirths as a rate per 1,000 population is liable to mislead, because if the population is ageing, that fact alone would cause a decline in the rate computed in this way. It is of more interest to know what proportion of developing pregnancies (i.e., pregnancies which advance to the 28th week) have live issue. Table 5 shows the stillbirth rate per 1,000 total (live and still) births for the past 10 years, with the England and Wales figures for comparison.

Table 5.

STILLBIRTHS PER 1,000 BIRTHS (LIVE AND STILL)

	<i>Anglesey</i>	<i>England and Wales</i>
1951.....	19	23
1952.....	25	23
1953.....	17	22
1954.....	25	23
1955.....	28	23
1956.....	28	23
1957.....	28	22
1958.....	20	22
1959.....	28	21
1960.....	19	20

Infant Mortality.

There were 16 deaths of infants under 12 months of age during the year. This gives an infant mortality rate of 18.1 per 1,000 live births. The corresponding rate for England and Wales was 21.7 per 1,000 live births. There were 2 deaths of illegitimate infants. The infant mortality rate per 1,000 corresponding live births were therefore :—

Legitimate : 16.5 Illegitimate : 57.1

The trend of the infant mortality rate over the past 10 years can be seen by reference to Table 6.

Table 6.

INFANT MORTALITY RATE

	<i>Anglesey</i>	<i>England and Wales</i>
1951.....	55	30
1952.....	47	28
1953.....	33	27
1954.....	28	25
1955.....	43	25
1956.....	23	24
1957.....	24	23
1958.....	17	23
1959.....	18	22
1960.....	18	22

Neonatal Mortality.

It is convenient when considering the mortality of infancy to differentiate between deaths in the first month of life (neonatal deaths) and subsequent deaths in the first year of life. The neonatal mortality is closely allied to stillbirth in-so-far as factors operative during the pregnancy and the confinement are largely responsible for both. The table below sets out the neonatal mortality for the county.

Table 7.

NEONATAL MORTALITY RATE
(Deaths under 1 month per 1,000 live births)

	<i>Anglesey</i>	<i>England and Wales</i>
1951.....	28	19
1952.....	33	18
1953.....	22	18
1954.....	17	18
1955.....	33	17
1956.....	17	17
1957.....	13	16
1958.....	12	16
1959.....	14	16
1960.....	15	16

Maternal Mortality.

There was one maternal death during the year. Table 8 gives details of maternal mortality for the past 10 years.

Table 8.

MATERNAL MORTALITY

	<i>Actual Number</i>	<i>Rate per 1,000 total births (live and still)</i>	
		<i>Anglesey</i>	<i>England and Wales</i>
1951.....	—	—	0.8
1952.....	1	1.1	0.8
1953.....	1	1.2	0.8
1954.....	1	1.2	0.7
1955.....	2	2.5	0.6
1956.....	1	1.2	0.6
1957.....	—	—	0.9
1958.....	—	—	0.4
1959.....	1	1.1	0.8
1960.....	1	1.1	0.4

General Mortality.

There were 719 deaths of persons of all ages registered during the year after allowing for transferable deaths (inward and outward). This gives a crude death rate of 13.8 per 1,000 population. The corresponding rate for England and Wales was 11.5. Because the rates as computed take no account of differences in the age composition of the population in question (hence the appellation "crude") whereas as a matter of common experience, mortality is correlated to age, valid comparisons of crude rates are impossible to make. Applying the comparability factor given by the Registrar General to the crude death rate gives a corrected death rate of 12.4 per cent. per 1,000 population.

Tables 9 and 10 show the deaths according to the cause and classified by age at death and by county district respectively.

There were 22 fewer deaths in 1960 than in the previous year. Heart diseases (including coronary disease) were 26 fewer than in 1959, and influenza and other respiratory diseases fell by 15. On the other hand road accident fatalities increased from 5 to 9 and suicides from 3 to 9 as compared with the previous year. It must be accepted that fluctuations of this order of magnitude from year to year are to be expected in a population of this size.

Table 9. CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE, 1960

CAUSES	MALES						FEMALES						Total	
	0-	1-	5-	15-	25-	45- 75-	0-	1-	5-	15-	25-	45- 75-		
1 Tuberculosis, respiratory	—	—	—	—	4	3	—	—	—	—	—	—	—	7
2 Tuberculosis, other	—	—	—	—	—	—	—	—	—	—	—	1	—	1
3 Syphilitic disease	—	—	—	—	—	1	—	—	—	—	—	—	—	1
4 Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5 Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6 Meningococcal Infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7 Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8 Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9 Other infective diseases	—	—	—	—	—	—	2	—	—	—	1	—	—	3
10 Cancer of stomach	—	—	—	—	5	4	7	—	—	—	—	1	3	23
11 Cancer of lung	—	—	—	—	4	5	1	—	—	—	—	1	—	11
12 Cancer of breast	—	—	—	—	—	—	—	—	—	—	1	6	2	12
13 Cancer of uterus	—	—	—	—	—	—	—	—	—	—	1	1	1	3
14 Cancer of all other sites	—	—	—	4	11	8	11	—	—	—	1	11	14	68
15 Leukaemia	—	—	—	—	—	1	—	—	—	—	—	—	—	1
16 Diabetes	—	—	—	—	—	—	1	—	—	—	—	1	4	9
17 Vascular lesions of nervous system	—	—	—	1	—	18	26	41	—	—	—	10	19	155
18 Coronary disease, angina	—	—	—	—	4	12	21	19	—	—	—	1	3	82

Table 10.

CAUSES OF DEATH CLASSIFIED BY COUNTY DISTRICTS,
1960

CAUSES	<i>Amlwch</i>	<i>Beaumaris</i>	<i>Holyhead</i>	<i>Llangefni</i>	<i>Menai Bridge</i>	<i>Aethwy</i>	<i>Twrcelyn</i>	<i>V. Valley</i>	<i>Total</i>
1 Tuberculosis, respiratory	—	—	1	—	—	2	2	2	7
2 Tuberculosis, other	—	—	1	—	—	—	—	—	1
3 Syphilitic disease	—	—	—	—	—	—	—	1	1
4 Diphtheria	—	—	—	—	—	—	—	—	—
5 Whooping Cough	—	—	—	—	—	—	—	—	—
6 Meningococcal Infections	—	—	—	—	—	—	—	—	—
7 Acute Poliomyelitis	—	—	—	—	—	—	—	—	—
8 Measles	—	—	—	—	—	—	—	—	—
9 Other infective diseases	1	—	—	—	—	—	1	1	3
10 Cancer of stomach	—	—	4	1	2	5	3	8	23
11 Cancer of lung	1	—	2	1	1	2	2	2	11
12 Cancer of breast	—	2	2	—	—	4	3	1	12
13 Cancer of uterus	—	—	—	—	—	1	1	1	3
14 Cancer of all other sites	1	3	11	2	2	21	17	11	68
15 Leukaemia	—	—	—	—	—	1	—	—	1
16 Diabetes	—	—	4	1	1	2	—	1	9
17 Vascular lesions of nervous system	9	2	31	4	8	34	22	45	155
18 Coronary disease, angina	4	4	15	7	3	19	11	19	82
19 Hypertension with heart disease	—	—	1	2	—	3	2	2	10
20 Other heart diseases	7	6	26	4	7	26	12	35	123
21 Other circulatory diseases	4	1	4	2	2	10	7	9	39
22 Influenza	—	—	—	—	—	—	—	1	1
23 Pneumonia	3	1	2	—	—	1	4	—	11
24 Bronchitis	1	—	7	—	—	5	5	7	25
25 Other diseases of respiratory system	—	—	—	—	—	1	—	—	1
26 Ulcer of stomach and duodenum	1	—	2	1	—	1	3	—	8
27 Gastritis, enteritis and diarrhoea	—	—	—	—	—	—	—	—	—
28 Nephritis and nephrosis	—	—	—	—	1	1	3	5	10
29 Hyperplasia of prostate	1	—	3	—	—	—	2	2	8
30 Pregnancy, childbirth, abortion	—	—	1	—	—	—	—	—	1
31 Congenital malformations	—	—	1	1	—	1	—	1	4
32 Other defined and ill-defined diseases	4	6	21	2	3	10	15	12	73
33 Motor vehicle accidents	—	—	1	—	—	3	1	4	9
34 All other accidents	—	1	1	—	1	3	5	—	11
35 Suicide	—	1	2	—	—	1	1	4	9
36 Homicide and operations of war	—	—	—	—	—	—	—	—	—
Totals	37	27	143	28	31	157	122	174	719

The Main Causes of Death.

A summary of the deaths showing the principal causes is given below.

Table 11.

	<i>Number</i>	<i>Per cent. of all deaths</i>
Heart disease	215	29.9
Cancer	118	16.4
Intra-cranial vascular lesions	155	21.6
Bronchitis and Pneumonia.....	36	5.0
Tuberculosis	8	1.1
Violence	29	4.0
Congenital Malformations, etc.	4	0.5
All other causes	154	21.5
	<hr/> 719 <hr/>	<hr/> 100.0 <hr/>

The following table shows the relative importance of the principal causes of death in Anglesey over a period of years.

Table 12.

<i>Years</i>	<i>Total deaths all causes</i>	<i>Per cent. of total deaths due to</i>				
		<i>Heart disease</i>	<i>Cancer</i>	<i>Bronchitis Pneumonia</i>	<i>Tuber- culosis</i>	<i>Fevers*</i>
1915/19 ...	4,151	11.2	9.2	13.4	10.5	9.3
1920/24 ...	3,733	13.6	11.4	9.5	9.7	8.2
1925/29 ...	3,810	14.2	12.6	10.1	8.7	7.9
1930/34 ...	3,744	21.6	14.1	7.3	8.1	4.6
1935/39 ...	3,775	26.4	14.8	6.9	5.7	7.6
1940/44 ...	3,772	26.0	14.0	9.5	5.6	4.0
1945/49 ...	3,508	30.6	16.0	7.1	4.8	0.9
1950/54 ...	3,622	29.4	16.1	7.2	2.3	0.6
1955/59 ...	3,767	32.6	16.7	6.6	1.2	0.2
1960/- ...	719	29.9	16.4	5.0	1.1	0.0

*Fevers include diphtheria, measles, whooping cough, cerebro-spinal fever, scarlet fever, typhoid, enteric fever and poliomyelitis.

EPIDEMIOLOGY

The notifications of infectious diseases during the year are set out below.

Tables 13 and 14 include cases diagnosed in Caernarvonshire hospitals and therefore notifiable to the Medical Officer of Health of the district in which the hospital is situate.

Table 13.

NOTIFICATIONS OF INFECTIOUS DISEASES, 1960

DISEASE.	URBAN					RURAL			Total
	<i>Amlwch</i>	<i>Beaumaris</i>	<i>Holyhead</i>	<i>Llangefni</i>	<i>Menai Bridge</i>	<i>Aethwy</i>	<i>Twrcelyn</i>	<i>Valley</i>	
Diphtheria	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	1	2	3	3	2	1	12
Dysentery	—	—	2	—	14	11	—	—	27
Acute pneumonia	1	—	—	—	1	1	—	1	4
Ac. poliomyelitis	—	—	2	—	—	1*	—	—	3
Measles	1	—	2	—	—	3	32	1	39
Whooping Cough	—	—	6	6	1	12	—	2	27
Food Poisoning	—	—	—	1	1	1	—	—	3
Typhoid and Paratyphoid Fever...	—	—	—	—	—	—	—	—	—
Meningococcal Infections	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	2	1	2	—	—	3	2	4	14
Ac. Inf. Encephalitis.....	—	—	—	—	—	—	—	—	—

* Paralytic.

In Table 14 will be found the trend of notifications over the last 10 years.

The incidence of infectious diseases generally was again low. *scarlet fever*, *measles* and *whooping cough* all showed a considerable decrease as compared with 1959, whilst *dysentery* and *puerperal pyrexia* were more prevalent. 14 cases of puerperal pyrexia were notified (all of Anglesey mothers in St. David's Hospital, Bangor); this is the largest number for many years. One case of *paralytic* and two cases of *non-paralytic poliomyelitis* occurred.

There were no cases of *diphtheria*, *smallpox* or *ophthalmia neonatorum* during the year.

This is the 11th year in succession in which no confirmed cases of *diphtheria* have been notified and the 14th consecutive year in which no death has occurred from this disease. That this happy state of affairs is the result of widespread immunisation cannot be contested.

Table 14

NOTIFICATIONS OF INFECTIOUS DISEASES, 1951/60

DISEASE	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
Diphtheria	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	27	58	49	99	21	28	10	50	27	12
Typhoid and Paratyphoid	—	—	—	1	2	1	2	1	14	—
Dysentery	50	6	63	3	22	12	45	14	3	27
Pneumonia	81	29	10	21	9	6	7	7	5	4
Meningococcal Infections	—	—	1	—	2	2	—	—	1	—
Ac. Poliomyelitis ...	4	2	5	4	4	6	3	1	—	3
Puerperal Pyrexia ...	—	—	1	—	—	—	—	—	8	14
Erysipelas	4	3	2	2	—	1	1	—	1	—
Measles	1191	70	763	159	938	204	54	1143	653	39
Whooping Cough...	430	286	144	168	158	32	5	2	89	27
Ophth. Neonatorum	—	—	—	—	—	—	—	—	—	—
Food Poisoning.....	—	7	3	59	2	1	8	1	3	3
Encephalitis	—	—	1	—	—	—	—	—	1	—
Malaria*	—	—	—	1	—	—	—	—	—	—

*Contracted abroad.

Mortality from infectious diseases during the year is shown in Table 15, together with the trend of mortality over the past 10 years.

It will be seen that only one death occurred during 1960 from this group of diseases.

Table 15

MORTALITY FROM INFECTIOUS DISEASES, 1951/60
(including certain diseases which are not notifiable)

DISEASE.	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
Diphtheria	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	—	—	—	—	—	—	—	—	—	—
Typhoid and Paratyphoid	—	—	—	—	—	—	—	—	—	—
Meningococcal Infections	—	1†	1*	—	—	1	—	—	1	—
Ac. inf. enceph. ...	—	—	—	—	1	—	—	—	—	—
Ac. Poliomyel. and polioenceph.	—	—	1*	—	—	1	—	—	—	—
Enceph. Leth.	—	—	—	—	1	—	—	—	—	—
Measles	—	—	1	1	—	—	—	—	1	—
Whooping Cough ...	1	1	1*	1	—	—	—	—	—	—
Influenza.....	38	5	4	9	7	2	10	4	11	1
Diarrhoea under 2 years	8	2	3	1	1	—	—	1	1	—
Puerperal Sepsis ...	—	—	—	—	—	—	—	—	—	—

*Inward Transferable Death.

†Not notified.

Venereal Disease

Details of the work done at the Caernarvon and Anglesey Clinic and at the St. David's Hospital for Anglesey patients are as follows :

Table 16

	<i>Syphilis</i>		<i>Gonorrhoea</i>		<i>Non-Venereal Conditions</i>	
	M	F	M	F	M	F
New Cases	—	—	3	—	18	7
Early	—	—				
Late	2	1				
Congenital	—	5				
Old Cases and transferred Cases	25	20	—	—	8	2
Defaulters :						
For treatment and/or observation	4	5	—	—	—	—
Total remaining	20	20	2	—	6	4

VACCINATION AND IMMUNISATION

The Council's proposals under this heading provide for vaccination and immunisation against the following diseases to be made available to the public :

Smallpox, diphtheria, whooping cough, poliomyelitis and tetanus.

B.C.G. vaccination is referred to in the section of this report dealing with tuberculosis.

As reliable antigens become available so new courses of injections are recommended. This calls for a revision of the programme of injections which is devised to afford the fullest measure of protection for our children. Such a revision was undertaken in 1960 and our arrangements were altered to take account of the best and most recent scientific advice. The programme of protective measures which is now recommended is as follows :—

The expectant mother	...	A course of polio injections.
At age of 5-6 weeks	...	First diphtheria/whooping cough/ tetanus.
4 weeks later	...	Second do.
4 weeks later	...	Third do.
At age of 7 months	...	First polio.
4 weeks later	...	Second polio. Smallpox vaccination (to fit in with other injections).
At age of 18 months	...	Booster diphtheria/whooping cough/ tetanus.
	...	Booster polio.
At age of 5 years	...	Booster diphtheria/tetanus.
At age of 10 years	...	Booster diphtheria/tetanus.
At age of 13 years	...	Tuberculosis (B.C.G. Vaccination).

A leaflet explaining this programme has been prepared and is issued to all expectant mothers.

Smallpox Vaccination.

During the year vaccination records were related to the area of residence as follows :

Table 17

VACCINATION RECORDS RECEIVED IN 1960

	<i>Primary</i>	<i>Re- vaccinations</i>	<i>Total</i>
Amlwch	40	9	49
Beaumaris	6	5	11
Holyhead	131	12	143
Llangefni	40	13	53
Menai Bridge	25	10	35
Aethwy	80	111	191
Twrcelyn	55	11	66
Valley	64	5	69
Total	441	176	617

The number of infant vaccinations in Anglesey in 1960 is equivalent to 50 per cent. of the number of live births notified.

Diphtheria Immunisation

936 children were immunised during 1960 as follows :

Under 1 year at date of final injection.....	664
From 1-4 years „ „ „ 	207
From 5-14 years „ „ „ 	60
15 and over „ „ „ 	5

In addition 1,224 children received a “boosting” dose during the year.

At the end of 1960 it is estimated that the following percentages of children were fully protected by immunisation against diphtheria.

<i>Age</i>	<i>Per cent. Protected</i>
Under 1 year	33.7
From 1 to 4 years	68.5
From 5 to 14 years	75.6
Total: Under 15 years.....!	70.65

Whooping Cough Vaccination

The number of children protected against whooping cough during 1960 were :

Under 1 year at date of final injection	623
From 1 to 4 years " " "	122
From 5 to 14 years " " "	5
15 and over " " "	1
 Total.....	 751

The number of children given a course of injections in 1959 was 652.

Poliomyelitis Vaccination

During the year there was again a considerable increase in the amount of vaccination against poliomyelitis.

During 1960, 2,033 persons received a first injection, 2,880 a second and 2,721 a third injection of vaccine. At the end of the year the cumulative total of persons who had received three injections was 13,642. Since vaccination was first introduced in a very small way in 1956, a total of 73,328 injections have been given, mostly at local authority clinics. The rest were given by general practitioners and our arrangements for the distribution of vaccine to doctors in private practice work smoothly.

During the year, too, vaccination was extended to cover the age group 25-40 years. Evening sessions, to suit the convenience of the public, were arranged in 25 towns and villages during the month of May, and all members of the staff, doctors, nurses and clerks voluntarily agreed to work considerable overtime during this drive. The public response was disappointing. Only 1,173 persons in this age-group attended for a first injection. This represents about 10 per cent. of those eligible. One feature of these clinics for adults was the introduction of disposable plastic syringes, so that a separate sterile syringe and needle is used for each case, thereby eliminating whatever risk there may be of serum hepatitis. These syringes also make it possible to hold immunisation clinics on premises which, however conveniently sited, would otherwise be unsuitable for the purpose.

Tetanus Immunisation

Immunisation against tetanus was incorporated in the Council's scheme for the first time in 1960, the popular form of this procedure being the use of triple antigen (diphtheria-whooping cough-tetanus)

for babies, though a few older persons were immunised with the combined diphtheria-tetanus antigen. The number of persons immunised during the year were :

Table 18

NUMBER IMMUNIZED AGAINST TETANUS IN 1960

<i>Age group</i>	<i>Triple antigen</i>	<i>Combined antigen</i>	<i>Total</i>
0-1 year	248	—	248
1-5 years	91	2	93
5-15 years.....	6	—	6
15 plus years	—	1	1
Totals	345	3	348

It is the intention to hold the records of tetanus immunisation in a form that will allow the vaccination state to be verified very rapidly. In due course it should be possible for a doctor in hospital or in private practice to obtain this information without delay (provided identifying details are supplied) in response to a telephone enquiry. In this way it may be possible to obviate some, at all events, unnecessary injections of tetanus anti-serum to injured persons.

TUBERCULOSIS

Thirty-two (28 respiratory and 4 non-respiratory) new notifications were received during the year and 8 deaths due to tuberculosis were registered. The data for notifications and deaths over the past 10 years has been as follows :

Table 19

	<i>Notifications.</i>			<i>Deaths.</i>		
	<i>Resp.</i>	<i>Non-resp.</i>	<i>Total</i>	<i>Resp.</i>	<i>Non-resp.</i>	<i>Total</i>
1951	67	20	87	14	3	17
1952	56	14	70	14	3	17
1953	68	14	82	12	5	17
1954	52	7	59	14	—	14
1955	55	12	67	11	—	11
1956	52	6	58	16	1	17
1957	51	11	62	4	1	5
1958	55	9	64	5	1	6
1959	40	17	57	6	1	7
1960	28	4	32	7	1	8

In addition 2 respiratory cases came to my knowledge during the year through the death returns ; 1 respiratory case was notified posthumously and 8 respiratory and 1 non-respiratory cases were transferred from other areas.

The number of known cases on the register decreased by 32 during the year.

Admissions to hospitals totalled 39 in 1960 and, as in 1959, there were no cases awaiting admission at the end of the year.

The following is the report of the Consulting Chest Physician for the area (Dr. J. Glyn Jones).

"The statistical returns show a further and very marked decline in the incidence of tuberculosis within the county. This enables one to view with more equanimity the transfer to geriatrics of hospitals formerly utilised for the treatment of tuberculosis. Druid Hospital is already fully occupied by geriatric cases and it is probable that Llangefni Hospital will follow before the end of the year.

"Nevertheless it must be realised that this will leave us with no hospital in Anglesey for the treatment of tuberculosis and other chest diseases and as many of the cases that do still need treatment are themselves elderly, some hardship is bound to be inflicted on certain patients so that others may be accommodated. It will need all the persuasive powers of doctors, health visitors and relatives to convince such patients of the need to enter a more distant hospital if we are to avoid the dissemination of disease at their homes, and no relaxation of the present intensive programme of case finding can be envisaged for some years.

"I would like once again to thank the County Medical Officer and all his staff for their continued enthusiastic collaboration with the Chest Clinic in this essential work."

Care and After Care

Table 20 gives details of the number of cases in each area and of the number of visits paid.

Table 20

<i>Area.</i>	<i>No. of Visits paid</i>	<i>No. of cases on Register at 31/12/60</i>
Amlwch	125	45
Beaumaris	137	39
Bodedern	118	35
Bodorgan	127	37
Holyhead	420	192
Llangefni	126	57
Llanfechell	111	31
Marianglas	103	35
Menai Bridge	114	30
Newborough	89	46
Totals	1,470	547

Shelters are still not popular, and at the end of 1960 only one shelter was in use.

Supplies of milk and extra nourishment were given free of charge to 7 cases during the year. In addition 15 cases, who did not qualify for a free issue under the Council's scheme, were assisted by the Voluntary Committee for the Welfare of Handicapped Persons.

It is the practice to urge the immediate household and family contacts of a new case to submit to examination by the chest physician.

In 1960 169 contacts of 44 new cases (including "inwards transferred") were examined in this way.

The number of new cases coming to light (whether by notification or otherwise) and the number of contacts examined were as follows :

	1959	1960
New and transferred cases of tuberculosis	67	44
Contacts examined :		
Children	112	124
Adults	29	45

B.C.G. Vaccination

In Table 21 is set out the work done during the year in the routine testing and vaccinating of young contacts of notified cases of tuberculosis. Since vaccinations commenced in 1949 a total of 1,433 contacts have been vaccinated with B.C.G.

Table 21

B.C.G. VACCINATION OF CONTACTS 1960

Age Group	Total Tested	Multiple Puncture		Vaccinated	Refusal of test and/or vaccination
		+ ve	— ve		
Up to 5 years....	69	3	66	115*	1
5-9 years.....	39	4	35	35	—
10 and over ...	16	5	11	11	—
Totals	124	12	112	161*	1

*Includes 49 vaccinations of new-born babies.

B.C.G. Vaccination of School Children

During the year B.C.G. vaccination was offered to all children aged 13 to 14 years attending schools in the county and also at the request of the Board of Management to the cadets of H.M.S. *Conway*.

The co-operation shown by the head teachers concerned and by the Chest Physician and his staff is gratefully acknowledged.

The following table shows the results of the testing of school children with a view to B.C.G. vaccination :

Table 22

	Sec. Schools	H.M.S. Conway
No. in age group	1,048	—
No. of consents	590	75
No. tested	501	75
No. vaccinated	397	59

Of those in the age group 36 were not included (33 had been vaccinated as contacts and 3 were notified cases of respiratory tuberculosis).

X-ray results

63 positive reactors were X-rayed (47 secondary school pupils and 16 cadets), but happily no cases of active disease were discovered among this group.

MIDWIFERY AND MATERNITY SERVICES

Births

The number of births *notified* during the year classified by place of occurrence was as follows :—

Table 23

	<i>Live Births</i>	<i>Stillbirths</i>
At Home	130	1
St. David's Hospital	487	14
Gors Maternity Home	273	1
Private Nursing Homes, etc.	5	—
Totals	895	16

In 1960 86 per cent. of all births took place in institutions.

The Council's midwives attended 137 deliveries, including miscarriages, during the year. 27 were midwives' booked cases and 110 were doctors' booked cases, the doctor being present at the time of delivery in 34 of these confinements.

Four applications were received during the year for the Committee to accept financial responsibility for the ante-natal care of unmarried mothers. Three of the applications were granted.

Analgesia in Domiciliary Midwifery

Fourteen out of the 16 District Nurse/Midwives employed by the Council hold the certificate of the Central Midwives Board authorising them to administer gas and air analgesia in midwifery cases, and the necessary apparatus is available to them all.

The number of domiciliary cases who received gas and air analgesia during the year was 34. In addition, pethidine was administered in 63 cases.

Trilene was given to another 41 cases. Some form of inhalation anaesthesia was provided by midwives for 56 per cent. of all cases confined at home. In addition in a few cases inhalational analgesia was administered by the doctor in attendance at the confinement.

Medical Aid

During the year midwives called in medical aid for domiciliary cases on 12 occasions. and this Authority was responsible for the payment of the doctor in two cases.

Midwifery Packs

Midwifery packs are issued by the midwives for domiciliary confinements on demand

Domiciliary Ante-Natal Care by Midwives

As soon as the expectant mother "books" with her, the midwife undertakes ante-natal supervision and, unless the mother is reluctant to attend, all midwives in the county service are instructed to arrange for their cases to be seen periodically at the county ante-natal clinics. The midwives attend with their cases. In addition they undertake regular ante-natal supervision of all booked cases in the patient's home. Midwives are also instructed, subject to the patient's agreement, to inform the family doctor of the pregnancy.

Details of the work done by domiciliary midwives in 1960 are given in Table 24.

Table 24

<i>District</i>	<i>No. of Domicil- iary Con- finements</i>	<i>No. of ante natal cases visited</i>	<i>No. of visits paid</i>	<i>No. of Still- births Regd.*</i>	<i>No. of Infant Deaths Regd.*</i>
Amlwch	11	81	239	2	2
Beaumaris	8	46	177	1	—
Bodorgan	15	52	283	1	2
Holyhead	35	42	297	7	7
Llanerchymedd ...	2	20	121	—	1
Llanfechell	5	29	180	1	1
Llangefni	24	120	762	4	2
Llanddona	19	39	125	—	—
Marianglas	4	37	238	—	1
Menai Bridge	5	38	197	1	—
Newborough	9	40	240	—	—
Totals	137	544	2,859	17	16

*Note.—The stillbirths and infant deaths registered are the total number for the district irrespective of where the confinement takes place.

Ante-Natal Clinics

Ante-Natal clinics were held at three centres in the county as follows :

Holyhead	Weekly
Amlwch	Fortnightly
Llangefni	Fortnightly

Details of attendances at these clinics are shown in Table 25.

Table 25

	Number of Cases			Attend- ances
	Ante- natal	Post- natal	Gynaeco- logical	
Amlwch	124	23	3	397
Holyhead	454	46	11	1,527
Llangefni	162	33	—	607
Totals	740	102	14	2,531

CHILD WELFARE

Infant Mortality

The infant mortality rate for 1960 was 18.1 per 1,000 live births as compared with 18.3 in 1959. The causes of infant deaths are shown in the following table :

Table 26

CAUSES OF INFANT DEATHS 1960

Cause	Age at Death					Total
	Under 1 day	1-7 days	1-4 Weeks	1-3 mths.	3-12 mths.	
Pneumonia and Bronchitis —	—	—	—	—	1	1
Meningitis	—	—	—	—	1	1
Cong. malformations ...	1	—	—	—	1	2
Prematurity	1	4	—	—	—	5
Other causes	3	2	2	—	—	7
Totals	5	6	2	—	3	16

Of the 16 infant deaths, 11 occurred within a week of birth. This gives an *early neo-natal mortality rate* of 12.4 per 1,000 live births. This figure, especially if combined with incidence of stillbirth to give a peri-natal mortality rate, gives an index of the hazards of pregnancy and parturition. The *perinatal mortality rate* for 1960 was 31.6 per 1,000 total births.

Child Mortality

There were 4 deaths in the age group 1 to 15 years and the causes were :

Appendicitis	1
Motor vehicle accidents.....	2
All other accidents	1

The importance of accidents as the cause of death of children is obvious from these figures.

The Care of Premature Infants

Details of cases notified in 1960 were as follows :

- | | |
|---|----|
| (a) Number of premature babies who were born : | |
| (i) At home | 4 |
| (ii) In private nursing homes | — |
| (iii) In hospitals | 51 |
| (b) Number of those born at home who were | |
| (i) Nursed entirely at home | 4 |
| (ii) Transferred to hospital | — |
| (c) Number of those born at home and nursed entirely at home : | |
| (i) Who died during first 24 hours | — |
| (ii) Who survived at the end of 28 days | 4 |
| (d) Number of those born at home and transferred to hospital who survived 28 days | — |
| (e) Number of those born in nursing homes who survived 28 days | — |
| (f) Number of those born in hospitals who survived 28 days. | 45 |

Infant Welfare Centres

One thousand four hundred and eight children were on the rolls during 1960 and the total attendances numbered 7,856, a decrease of 3 compared with 1959.

Details of the work done are shown below :

(1) No. of centres provided at end of year	13
(2) No. of sessions held per month at centres	30
(3) No. of children who attended centres during the year and who were born in : 1960	488
1959	435
1958-55	485
	— 1,408
(4) No. of children who first attended the centres during the year who at their first attendance were under 1 year	595
(5) Total number of attendances made by children included in (3) during the year :	
Under 1 year	5,445
1 year but under 2	1,257
2 years but under 5	1,154
	— 7,856

Clinics are held at 13 places in the county as detailed in Appendix C.

As a means of ensuring the best use of skilled “woman power” the Council engaged two retired nurses to assist in the clinics thereby relieving health visitors of routine duties so as to allow them to devote more time to advising individual mothers.

In addition to the Council’s clinics one “unofficial” clinic was supported during 1960 in that the local health visitors assisted free of charge at these sessions. At this clinic 67 children were seen during the year, the number of attendances being :

Children under 1 year	221
From 1 to 2 years	71
Over 2 years	38
	—
Total attendances	330
	—

Dental Care of Mothers and Young Children

There was an increase in 1960 of dental services rendered to these priority classes. Details are set out in Table 27.

Table 27

	<i>Children under 5 years</i>	<i>Expectant and Nursing mothers</i>
Number seen	32	16
Number requiring treatment ...	24	15
Number treated	19	9
Number rendered dentally fit	7	2
Forms of treatment :		
Number of teeth extracted	18	5
Number of teeth filled	29	5
Number of Silver Nitrate Treat- ments	—	—
Number of scaling and gum treatments.....	9	7
Number of radiographs	—	17
Dentures supplied	—	—

In addition to the above a further 520 young children were examined in connection with the fluoridation survey.

The Principal Dental Officer, (Mr. H. Levison, F.D.S.) comments as follows :

“Expectant and nursing mothers are eligible for treatment throughout pregnancy and for one year after confinement. Few mothers take full advantage of this service however. The most likely reasons for this are a general lack of interest in dental health and the limited period of eligibility.

“Most mothers are referred for treatment too late in pregnancy to allow anything more than removal of gross sepsis and prevention of foreseeable pain during the next few months. For restoration to complete dental fitness they are advised to return for treatment as soon as possible after the child is born. But the new demands upon the mothers’ time usually result in failure to seek completion of treatment.

“Furthermore, many mothers rightly consider it preferable to seek all their treatment from a private practitioner as they can thereby maintain continuity of future treatment by the same dentist, after becoming ineligible to attend the dental clinic.

"Progress in the treatment of pre-school children has been disappointing. Too few parents bring their children for routine inspection; the majority wait until toothache occurs. These unfortunate children are already dentally crippled by then and their condition frequently necessitates immediate extractions for the relief of pain. There can be no worse introduction to dental treatment for a child than to undergo multiple extractions and fillings.

"Is it too much to expect parents to save their children such distress by seeking regular inspection and treatment beforehand?"

Distribution of Welfare Foods

During 1960 the following welfare foods were distributed in the county :

National Dried Milk, full cream	19,891
National Dried Milk, half cream	478
Cod Liver Oil	3,444
Orange Juice	19,426
Vitamin A. and D Tablets	1,803

Deafness in Young Children

The importance of the early recognition and treatment of deafness cannot be exaggerated. By this means alone can the resulting disability be minimized. Through the courtesy of the Caernarvonshire Medical Officer of Health we were able to refer cases to a clinic at Bangor held by Professor Sir Alexander Ewing and Lady Ewing.

2 new cases attended during 1960

No child under the age of 5 years was in attendance at a special school during 1959.

Phenylketonuria

This rare inherited disorder, which untreated gives rise to severe mental abnormality, can be detected at an early age by a simple test, which we were able to show in a trial run early in the year, can be applied satisfactorily in the field. The health visitors now arrange to test the urine of all babies in their areas at the age of 4-5 weeks.

HEALTH VISITING

Statistics

Tables 28 and 29 give some details of the work done by the health visitors during the year.

Table 28

<i>District</i>	<i>Births</i>	<i>1st visit</i>	<i>Other visits to babies</i>		
		<i>0-1 yr.</i>	<i>0-1 yr.</i>	<i>1-2 yrs.</i>	<i>2-5 yrs.</i>
Amlwch	83	91	391	142	360
Beaumaris	61	64	745	616	720
Bodedern	74	74	561	330	551
Bodorgan	85	81	822	476	396
Holyhead	268	255	401	231	421
Llanfechell	58	58	546	346	669
Llangefni	95	84	892	479	422
Marianglas	56	57	665	364	575
Menai Bridge	67	69	821	333	470
Newborough	48	41	613	326	739
Totals	890	874	6,457	3,643	5,323

The health visitors also visited other cases as follows :

Table 29

Tuberculosis	1,388
Home Help Cases	448
Sub-normal cases	382
Miscellaneous.....	1,791
Total	4,009

One student health visitor (Miss E. Davies) was successful in obtaining her certificate. Miss M. Lewis was accepted as a student for training in 1960-1961.

In-Service Training

During the year regular seminars were held for members of the nursing staff to discuss questions relating to the psychological development of small children. At each session a suitable film was shown

followed by a period of discussion led by Dr. J. Aled Williams, senior registrar, and Dr. G. A. V. Morgan, senior psychologist of the North Wales Child Guidance Service. Health visitors were encouraged to bring forward cases of difficulty in child management with which they had been confronted in their daily work. These seminars proved very popular and it is hoped to continue to hold them annually during the winter months. We are indebted to the members of the Child Guidance Service for their readiness to assist in this work.

HOME NURSING

The qualifications of the nursing staff at present in post are as follows :

<i>S.R.N.</i> , <i>S.C.M.</i> , <i>Q.N.</i>	7
<i>S.R.N.</i> , <i>S.C.M.</i>	2
<i>S.E.A.N.</i> , <i>S.C.M.</i>	6
<i>S.C.M.</i> (<i>engaged entirely on Midwifery</i>)	1
<i>S.R.N.</i>	1

Three members of the nursing staff took the Queen's Institute course of training in district nursing during the year—Miss J. Eunice Jones (Deputy Superintendent Nursing Officer), Nurse E. M. Davies and Nurse Kitty Jones.

Table 30 shows the work done during 1960 in the separate districts.

Table 30

<i>District</i>	<i>Cases</i>	<i>Visits</i>
Amlwch	163	2,270
Beaumaris	86	1,922
Bodedern	98	3,063
Bodorgan	58	952
Holyhead	187	6,277
Llanddona	71	1,541
Llanerchymedd	65	1,561
Llanfechell	102	1,642
Llangefni	174	2,865
Marianglas	137	2,369
Menai Bridge	87	1,488
Newborough	80	1,086
Totals	1,308	27,036

The following table gives further details of these cases :

Table 31

<i>Group</i>	<i>Total No. of Cases</i>	<i>Total No. of Visits</i>
Medical	904	17,722
Surgical	379	8,333
Tuberculosis	22	924
Maternal Complications	3	57
Totals	1,308	27,036

The domiciliary nursing service staff consists of 16 nurses, 15 of whom combine home nursing with midwifery. The county is divided into 12 nursing districts. In the Holyhead area there are two district nurses one of whom is engaged mainly on domiciliary nursing, as there is also a full-time midwife in this area. Llangefni and Amlwch each have two district nurses, one concentrating mainly on midwifery, and the other on home nursing.

The service carried on steadily throughout the year. There was a further decrease of 196 in the number of cases and a decrease of 5,272 in the number of visits as compared with 1959.

There has been over the last few years a steady decline in the number of cases attended by the district nurses and in the number of visits paid by them. In five years the total number of cases has dropped by 25 per cent. and the total visits by 15 per cent. This downward trend is discernible in all the nursing districts in the county and applies to most of the categories of cases which are attended by the nurses. The decline in the number of children attended and in the number of tuberculosis cases nursed at home is not unexpected but these groups between them constitute only a fraction of the total volume of work. There has been a similar decline—in total much larger—in the number of medical cases, in the number of aged patients and in the number of long-term cases. The number of surgical cases, on the other hand, has remained fairly constant over the last few years.

The diminishing volume of work done by district nurses is not a local phenomenon because in the national statistics a similar trend can be discerned. The causes of this decline may well be complex, reflecting for example the effect of changes in medical practice such as the substitution of oral diuretics for drugs administered parenterally. If the rate of decline continues, for whatever reason, it will be necessary to examine critically whether the pattern of home nursing services needs adjusting to meet present-day circumstances.

No special provision is made for the home nursing of sick children but the volume of work under this score may be judged by the 394 visits that were paid to 43 children under the age of 5 at the time of the first visit. No night nursing service is provided.

546 patients were over 65 years of age at the time of the first visit and 11,528 visits (i.e., 43 per cent. of the total made) were to these cases. There was a considerable amount of chronic nursing (hemiplegia, rheumatics, cardiacs and senility). 235 (or 18 per cent.) of the total number of patients received more than 24 visits during the year, 13,275 visits being paid to these cases.

Loan of Sick Room Equipment

Each district nurse holds the following items of equipment which she may issue on loan free of charge and without a deposit being paid: air ring, bed pan, bed rest, hot water bottle, rubber sheet, urinal.

More expensive items, such as invalid chairs and rubber mattresses are stored centrally and a refundable deposit and a weekly hire charge continue to be made.

During the year 357 items of medical equipment were issued on loan, compared with 369 items in 1959 and 383 items in 1958.

DOMESTIC HELP SERVICE

The service is provided by three whole-time home helps and by 63 part-time persons employed on a casual basis. The number of persons who received help increased in 1960 to 132 as compared with 115 in the previous year and 134 in 1958.

Of the 132 cases assisted in 1960 the largest group (74 cases) was aged and infirm persons. Tuberculous (5) cases by comparison were few in number. The remaining 53 cases were a miscellaneous group of sickness, mental subnormality, etc.

MENTAL HEALTH

Administration

The mental health services are administered by the Health Committee through the Mental Health Sub-Committee, which meets quarterly. The Medical Officer of Health is the executive officer in charge of the service.

Staff

The Council appointed their first whole-time mental welfare officer and seconded him for a two-month period training at the North Wales Hospital, Denbigh. Transitional arrangements were made to retain for a temporary period after November 1st the services of three officers (who had been duly authorised officers) as mental welfare officers.

We shall continue for the time being to look as hitherto to the North Wales Hospital for the services of psychiatric social workers.

The Wales Hospital Board are appointing a consultant with special experience of and responsibility for cases of subnormality. This move is a welcome one in that the local health authorities of the area will have access to expert advice with these cases.

The Council, in consultation with the local medical profession and the Wales Hospital Board, prepared a list of practitioners with special experience of mental disorder who are thereby authorized to sign "medical recommendations" under the Act.

Survey of Mental Health Needs.

The survey of mental health needs in a rural area which is financed by the Nuffield Provincial Hospitals Trust started in earnest during 1960. Dr. D. Alun Jones, senior registrar, and Mr. H. Lewis Miles, psychiatric social worker, were appointed to undertake the field work and commenced duties in April. Most of their time in 1960 was spent at the North Wales Hospital, Denbigh, extracting records of patients treated at the hospital during the last decade.

The Mental Health Act, 1959

The Mental Health Act, 1959, introduced a number of important changes affecting the role of the local authority in the administration of mental health services. The Act came into operation on November 1st, 1960, and this report insofar as it is a record of work done must necessarily use the terminology that applied under the old dispensation.

The work done in the period up to 31st October, 1960, under the Mental Deficiency Acts and under the Lunacy and Mental Treatment Acts is shown in Tables 32 and 33 respectively :

Table 32

MENTAL DEFICIENCY ACTS, 1913 TO 1938

	Period 1st Jan.—31st October, 1960			
	Under age 16		Aged 16 and over	
	M	F	M	F
I. Particulars of cases reported during 1960 :				
(a) Cases reported by Local Education Authorities (Sect. 57 Education Act, 1944):				
(i) Under Sect. 57 (3).....	2	1	—	—
(ii) Under Sect. 57 (5) :				
On leaving special schools.....	—	—	—	—
On leaving ordinary schools	—	—	—	—
(b) Cases referred by the police or by the courts under Sect. 8(1) (a) (or as a result of other action by the Courts)	—	—	—	—
(c) Other sources	—	—	—	—
(d) Other defectives reported during 1960:				
(i) Not confirmed at 31/10/60	—	—	—	—
(ii) Not at present "subject to be dealt with"	—	—	—	—
Total No. of cases reported during year	2	1	—	—
II. Disposal of cases :				
(a) Those found "subject to be dealt with"				
(i) Placed under statutory supervision	2	1	—	—
(ii) Placed under Guardianship	—	—	—	—
(iii) Taken to "places of safety"	—	—	—	—
(iv) Admitted to hospitals	1	—	—	—
(b) Those not at present "subject to be dealt with":				
(i) Placed under voluntary supervision ...	—	—	—	—
(ii) Action unnecessary	—	—	—	—
Total of Item II	2	1	—	—

Table 33

ADMISSIONS, DISCHARGES AND DEATHS DURING THE
PERIOD 1st JANUARY—31st OCTOBER.

	<i>Admissions</i>		<i>Discharges</i>		<i>Deaths</i>	
	M	F	M	F	M	F
<i>Mental Treatment Act,</i> 1930 :						
Sect. 1 Vol. Patients ...	30	8	5	1	—	—
Sect. 5, Temp. Patients. .	—	—	—	—	—	—
<i>Lunacy Act, 1890 :</i>						
Certified Patients, Sect. 11, 15	2	1	—	2	—	2
Temporary Patients, Section 20	19	12	4	2	—	—
Total	51	21	9	5	—	2
Further analysis of Sect. 20 cases :						
Discharged from hospi- tal	—	—	—	—	—	—
Admitted to hospital as :						
(a) Voluntary patients...	13	5	—	1	—	—
(b) Certified patients ...	2	5	—	2	—	—
Total	15	10	—	3	—	—

As from November 1st the distinction between cases dealt with under the legislation relating to mental deficiency and that relating to lunacy was removed. Henceforth we shall be concerned with cases of "mental disorder" and the numbers of such persons who were being cared for in the community and supervised by the local health authority at the year's end were as follows :

Table 34

NUMBER OF PATIENTS SUFFERING FROM MENTAL
DISORDER AND UNDER LOCAL HEALTH AUTHORITY
CARE AT 31st DECEMBER, 1960

	<i>Under 16</i>		<i>Age 16 and over</i>	
	M	F	M	F
Receiving training or occupation in day centre	5	1	—	—
Awaiting training or occupation in day centre	—	—	—	—
Resident in L.A. home/hostel	—	—	7	3
Receiving home visits	6	—	49	53
Others (including not yet visited).....	—	—	9	8

At the end of the year 1 case was awaiting institutional treatment.

Training Centre, Holyhead

This training centre, with Mrs. Mabel B. Wilson, J.P., as supervisor, was open for morning sessions only during the year. 6 defectives were in attendance, but it is hoped this number will increase as the value of the work being done becomes more widely known. These children in future can be compelled to attend.

AMBULANCE SERVICE

Administration and Staff

Ambulances were stationed at Amlwch, Menai Bridge, Llangefni and Holyhead. The two latter stations are manned throughout the 24 hours by whole-time staff.

The ambulance at Amlwch is stationed at the premises of the Associated Octel Company and manned by a rota of volunteer drivers trained in first aid on the staff of the company. This arrangement has worked satisfactorily.

Towards the end of the year we took delivery of our first mini-ambulance. This vehicle will be stationed at Holyhead and it is anticipated will be of considerable use for the conveyance of sitting cases to local hospital clinics.

Statistics

Statistics relating to 1960 are given in table 35 overleaf.

During the year 11,283 cases were conveyed by ambulance or sitting car—an increase of 8.8 per cent. on the figure for 1959. The mileage involved rose to a total of 239,617—an increase of 16.8 per cent. on the previous year.

For the last four years there has been an annual increase in the number of miles covered by our ambulances and sitting cars. Compared with 1957 the total mileage for 1960 shows an increase of 21 per cent. Comparing the same two years the number of patients carried has only increased by 10 per cent. At the same time there has been if anything a slight increase in the efficiency with which journeys are planned because for every 100 patients carried in 1957 52 journeys were needed whereas in 1960 only 51 journeys were required.

The increase in mileage cannot, therefore, be accounted for entirely by the increase in the number of patients nor by a falling off in operational efficiency. What is in fact happening is that more and more patients are being taken to distant hospitals. To some extent this is inevitable because facilities for highly specialised forms of treatment can only be provided in specialised units in large centres of population.

Table 35

AMBULANCE SERVICE 1960

	AMBULANCES		SITTING CARS		TAXIS	
	Cases	Journeys	Mileage	Cases	Journeys	Mileage
First Quarter	1,658	797	28,498	1,280	672	29,648
Second Quarter	1,546	791	29,839	1,285	667	29,817
Third Quarter	1,629	845	31,149	1,112	633	29,957
Fourth Quarter	1,665	782	30,408	1,084	592	26,899
	6,498	3,215	119,894	4,761	2,564	116,321
AMBULANCES						
SITTING CARS						
AMBULANCES						
SITTING CARS						
Average mileage per journey	37.29			45.32		
do. patient carried	18.45			24.43		

WELFARE SERVICES

The Council's responsibilities under Part III of the National Assistance Act, 1948, stand referred to the Health Committee, who appointed a Welfare Sub-Committee to deal with these functions. The duties referred to are :

- (a) the provision of accommodation :
 - (i) for persons in need of care and attention because of age, infirmity, etc. :
 - (ii) temporarily and, in certain circumstances, for persons in urgent need thereof.
- (b) the provision of welfare services for handicapped persons. At the present time the only categories of such persons for whom the provision is obligatory are the blind and the partially sighted.

Details of the work done for the blind will be found on pages 44-46. The Council make a financial contribution to the Chester and North Wales Society for the Deaf and Dumb.

Towards the end of the year preliminary steps were taken to formulate a scheme for the general classes of handicapped persons.

The Provision of Accommodation

Accommodation under Part III of the Act was provided throughout the year at Llys y Gwynt, Holyhead (20 beds), Park Mount, Llangefni (28 beds) and Garreglwyd, Holyhead (41 beds).

Details of the use made of these places are shown below :

Table 36

	<i>Garreg- lwyd</i>	<i>Llys y Gwynt</i>	<i>Park Mount</i>	<i>Total</i>
Residents at 1/1/60	35	20	25	80
Admitted	25	14	5	44
Discharged*	19	14	9	42
Died	1	2	—	3
Residents at 31/12/60	40	18	21	79

**Includes residents sent to hospital and who subsequently died.*

The services provided at the Old People's Homes included chiropody. Regular visits are now paid to all these Homes by a qualified medical auxiliary.

Another amenity which is much appreciated is a monthly film show given in each Home by a senior member of the department's staff.

During the summer an outing was arranged for the residents of all three Homes. Motor-coaches took the old people on a journey round Anglesey, with tea provided at a convenient point. The trip was, needless to say, greatly appreciated.

The Council exercised their powers under the Act to maintain during 1960 a total of five persons in accommodation provided by voluntary organisations outside the county.

Welfare of the Blind

The Council employ one whole-time teacher of the blind.

Table 37

REGISTER OF BLIND PERSONS

	<i>On</i> 1/1/60	<i>On</i> 31/12/60
Males	60	53
Females	96	98
	<hr/>	<hr/>
Total	156	151
	<hr/>	<hr/>

Changes during the year :

New Cases registered	17
Deaths of persons on register	20
Transfers "In"	1
Transfers "Out"	3
De-certified	—

As will be seen from table 37 the number of registered blind persons in the county decreased by five during the year. The number of observation cases, remained the same as in 1959 (29 cases) These were also visited periodically by the home teacher. The majority are suffering from failing eyesight owing to advancing age or congenital causes, and may, after a later examination, become registered as blind persons.

The age composition of the blind population on 31st December, 1960, was as follows :

Table 38

<i>Age in years</i>	<i>No. on Register</i>
0-4	—
5-15.....	2
16-20.....	2
21-39.....	3
40-49.....	7
50-64.....	27
65 upwards	110
Total	151

One boy and one girl of school age are on the register ; both are attending special residential schools for the blind. One youth was undergoing training at a residential centre for adolescents.

One man was also undergoing training in mat making under the Ministry of Labour Training Scheme at the Royal School for the Blind, Leatherhead.

The woman who was sent in 1959 to the Birmingham Workshop for the Blind for a refresher course in sock machine knitting was accepted into the Home Worker Scheme during the year.

Four blind persons were in "open" employment, including one employed as a factory operative and one as a business executive.

The home teacher paid 1,364 visits to registered blind persons and 77 to observation cases during the year.

A number of articles made by pastime workers are sold through the agency of the North Wales Society for the Blind.

Summer outings were organised to Pwllheli, Church Bay and Benllech, while, in addition to sponsoring them, the North Wales Society for the Blind also provided funds for Christmas parties and gifts to each blind person.

The usual social activities continued throughout the year. The Social Centres have been well attended, especially at Holyhead, where a very active voluntary committee have arranged interesting programmes through the year.

Blind persons are encouraged to compete at local eisteddfodau in handicrafts. Four persons were persuaded to send articles to this year's Anglesey festival. It is regretted however that whilst keen interest is being maintained in handicrafts, the learning of Braille and Moon is diminishing, due probably to blindness coming on in later years and the introduction of wireless giving them all the information and entertainment required. The regular readers however continue to make good use of the library services provided.

Wireless sets are loaned by the R.N.I.B. and batteries are supplied through the Home Teacher. Repairs are arranged free of charge through the North Wales Society for the Blind.

Holidays were arranged for nine persons during the year at Llys Onnen Home for the Blind, Abergele.

Preventable Causes of Blindness

Of the 17 newly registered blind persons their condition was due to cataract in 7 cases. Five were considered to require treatment, and this has now been given in three cases. No cases were due to ophthalmia neonatorum.

Welfare of the Deaf and Hard of Hearing

Under the Council's scheme the Chester and North Wales Society for the Deaf continued to act as the authority's agents.

Details of the work done by the Society's officer are given below :

No. of persons on Register at 1st January, 1960	37
New cases.....	—
Number died	2
Number left Anglesey	—
No. on Register at 31st December, 1960.....	35

Classification of cases on Register at 31st December, 1960 :

Number of Deaf and Dumb : Adults	13
Children	6
Number Deaf with Speech : Adults	8
Number Deaf/Blind with Speech : Adults	8
	—
Total	35
	—

Chiropody

A chiropody scheme was introduced in May, 1960, under which certain classes of persons are eligible to obtain treatment from the chiropodist of their choice selected from a number of qualified chiropodists who have agreed to serve on a panel for the purpose. The eligible groups are: persons of pensionable age, expectant mothers and the physically handicapped.

Initially, treatment was only made available at the chiropodist's surgery, but in December the arrangements were extended to allow treatment to be given in their own home for certain selected cases. A charge of 2/- per treatment is made in each case, the balance of the cost being met by the Council. There has been considerable delay in reaching agreement at a national level on the scale of payments to be made to chiropodists, but fortunately five local chiropodists agreed to operate the scheme on the understanding that a retrospective adjustment in their fees would be made when the national scale is settled.

During the year 249 cases were seen and 532 treatments given. All the cases were persons of pensionable age.

Meals-on-Wheels

The provision of hot cooked mid-day meals on one or more days a week to elderly people living alone is arranged in this county in three ways. At Beaumaris and Holyhead, meals are provided by the W.V.S., the local committee having been assisted by an initial grant from the County Council. At Amlwch, the W.V.S. are responsible for the delivery of meals, but these are prepared in the canteen of the primary school (during term-time) or in the canteen of the Associated Octel Company (during school holidays). The welfare committee is responsible for meeting the difference between the charge made to the recipient for the meal and the cost incurred by the school meals service or of the company as the case may be. This arrangement has worked satisfactorily and it would seem to be one that could with advantage be developed elsewhere.

Close to Llys y Gwynt, one of our homes for the aged, there is a group of bungalows, most of them occupied by elderly people. It was found that several of these old people wished to take advantage of a "meals-on-wheels" service, but the W.V.S. kitchen was already working nearly to capacity. We therefore arranged for a hot meal to be delivered to them on three days a week (including Sunday) from the kitchen at Llys y Gwynt. This arrangement, too, has worked satisfactorily and the kitchen staff and the gardener (who delivers the meals in his dinner hour) at Llys y Gwynt are to be commended for their part in this good work.

Welfare of the General Classes of Handicapped Persons

Discussions took place during the year with representatives of the Voluntary Society for the Welfare of Handicapped Persons and agreement was reached on the functions under the council's scheme which should fall to be discharged by the Society and council respectively.

The Central Council for the Care of Cripples offered to assist in launching our scheme and the offer was gratefully accepted by the committee. Some delay occurred because of staffing difficulties but eventually the Central Council were able to obtain the services of a highly qualified social worker (Mrs. Nerys Wheldon) who commenced a review of all persons known or suspected to come within the group of the general classes of handicapped persons. This detailed investigation of the needs of individual persons was incomplete at the year's end.

The Council continued, meanwhile, its contribution towards the cost of a scheme for the instruction in crafts of homebound handicapped persons which had been launched by the Anglesey Branch of the British Red Cross Society. This has proved a great boon to a number of unfortunate people—41 such persons were helped during the year.

The teacher also visited one of the Old People's Homes regularly and several residents have taken up handicrafts as a result of her efforts.

The Voluntary Society for the Welfare of Handicapped Persons continued its useful activities during the year and a number of cases referred by the department to the society received practical help in a variety of ways.

THE CONTROL OF FOOD AND DRUGS

Pasteurisation

There are two pasteurisation plants in the county and weekly visits of inspection (including milk sampling) are paid to both plants by the county health officer. He reports that both plants were well organised and adequately supervised throughout 1960

288 milk samples were taken (285 T.T. pasteurised and 3 pasteurised). All these samples, passed the Phosphatase test. In 12 cases the short Methylene Blue test was not performed as the atmospheric shade temperature exceeded 65°F.

564 milk bottle rinses were also examined, 519 of which proved satisfactory, 11 fairly satisfactory and 34 unsatisfactory. 21 churn rinses were examined of which 17 proved satisfactory, 2 fairly satisfactory and 2 unsatisfactory.

48 swabs of different parts of the equipment of one of the plants were also submitted for examination. Of these 46 proved satisfactory and 2 fairly satisfactory.

**Report of the Chief Inspector of the Food and Drugs Department
upon the administration of the Food and Drugs Act and other
allied duties.**

“Food and Drugs Act, 1955.

“(i) Compositional Quality of Food

During the year, 117 samples of food as set out in the table below were submitted to the Public Analyst for chemical analysis :

<i>Food.</i>	<i>Number submitted</i>	<i>Number “Not Genuine”</i>
Milk	6	1
Tinned Milk	1	—
Milk Products	9	—
Ice Cream	4	2
Cheese	3	—
Meat and meat products	26	3
Fish products	2	—
Margarine	1	—
Cream	2	—
Vegetables—tinned	3	—
Bread	1	—
Honey	2	1
Rice Pudding	2	—
Toffee Apple	1	—
Medicines	8	—
Fruit—tinned	4	—
Fruit—dried	3	1
Alcoholic Drinks	2	—
Fruit Drinks	6	—
Marmalade	1	—
Confections	16	—
Beverages	9	—
Savouries	2	—
Condiments	3	—
Totals	117	8

The following samples were reported by the Public Analyst as being “not genuine”:

(a) *Milk.* Only one sample of milk was reported as being unsatisfactory, and this because of a fat deficiency of 7 per cent. Appeal-to-cow samples taken at the farm indicated that the fault lay in inadequate mixing of the milk between cowshed and bottle. It

was felt that, after advising the producer of this point, no further action was necessary. During the year four further samples were examined in the department, all of which were satisfactory.

(b) *Honey*. This was Anglesey produced honey which contained traces of foreign matter and affected its saleability rather than its quality.

(c) *Currants*. While examining a carton of currants, rodent excreta was found. The box (28 lbs.) had been opened in the presence of the sampling officer, so there was no question of local contamination. It was found that the dried fruit had been boxed in Greece and that it was there that the contamination had occurred. The importers have now insisted that all currants purchased by them are to be machine-dried rather than naturally dried, as it was felt that this was when the fruit was contaminated.

(d) *Ice cream*. Two samples were deficient. One, of local manufacture, was deficient in fat. As it was felt that the deficiency was due to ignorance, the manufacturer was "cautioned." Subsequent samples were reported as satisfactory. The other sample, also of local manufacture, was described as "Dairy Ice Cream" but no vegetable fat as well as butter fat was detected.

(e) *Meat Products*. A sample of minced chicken was found to contain 75 per cent. chicken. Although there is no standard laid down the Public Analyst felt that, in view of the description, there should have been at least 95 per cent. of meat. The matter was taken up with the manufacturers and subsequent samples have been up to that figure.

One sample of sausages found to contain preservative did not bear the statutory statement.

A sample of lucheon meat loaf was, in the opinion of the Public Analyst, 20 per cent. deficient in meat content. Here again it was possible to improve on the quality without having to take proceedings.

In addition to those samples submitted to the Public Analyst, as a matter of routine, articles are examined in shops almost daily. The public, too, are realising more and more the function of the Department and complaints, which are treated in the strictest confidence, are much more frequent.

A tin of corned beef was found to have a slight mould. The suppliers withdrew the whole of this consignment throughout the area.

In addition to the samples submitted to the Public Analyst, 201 samples were examined in the Department for butter-fat and other solids. Samples suspected of being not genuine were followed up by samples submitted to the Public Analyst. Only one, reported above, received an adverse report.

The chemical quality of the milk retailed in the county is extremely high. For yet another year there has not been a single adulterated sample, this notwithstanding that the samples taken average four per year from each producer.

A $\frac{1}{2}$ -lb. packet of butter was found to have a large staple embedded in it. It was probable that this was caused when the packing-case of pre-packed butter was opened, but it was impossible to place the blame at all accurately.

(ii) Tuberculosis and Brucella Abortus

During the year 613 samples of milk were submitted for biological examination for tuberculosis and brucella abortus. The 543 results received were classified as follows :

Negative results	515
Evidence of Tuberculosis	—
Evidence of Brucella Abortus	15
Void samples	13

In every case, each positive brucella report was followed up by a restriction notice issued by the local public health authority. At the end of the year there were 5 such notices in force.

Although the number of positive brucella results is higher than usual, four originated from a source outside the county.

(iii) The Milk (Special Designations) (Specified Area) Order, 1955.

This Order requires that all milk sold in Anglesey for human consumption shall be sold under one of the permitted designations, that is, Tuberculin Tested, Tuberculin Tested (Pasteurised), Pasteurised and Sterilized.

On October 1st the Milk (Special Designation) Regulations, 1960, came into effect. The main change is that all dealers' licences, other than those issued by the Minister, will be issued by the Food and Drugs authority in which are situated the premises at or from which the milk is sold. This Department has, for many years, carried out the requirements of the Regulations with regard to the quality of the milk sold to the public, and, for this particular purpose, the Regulations will mean no increase in duties. The licences for premises will now be issued on a five yearly instead of annual basis.

During the year, 1,010 samples of milk from retail supplies were submitted for examination (816 raw and 194 heat-treated). $7\frac{1}{2}$ per cent. of the raw milk was reported as unsatisfactory. In the case of producer-retailers, details of unsatisfactory samples are reported to the Ministry of Agriculture, Fisheries and Food for follow-up action. Particular attention is drawn to the fact that all the heat-treated samples were satisfactory.

(iv) Ice Cream

During the year, 389 samples of ice cream were submitted for bacteriological examination to the Public Health Laboratory at Conway. The high standard reported last year has been maintained; the samples being graded as follows:

Grade I—367; Grade II—18; Grade III—2; Grade IV—2.

(v) Pharmacy and Poisons Acts, 1933-1941.

At December 31st, 1960, 110 premises were registered for the sale of Poisons listed in Part II of the Poisons List. Regular visits failed to reveal any breach of the storage and labelling conditions.

H. A. THOMAS."

SANITARY CIRCUMSTANCES

Housing

Table 39 (which is adapted from Appendix B of the Quarterly Housing Return of the Ministry of Housing and Local Government) gives details of the housing progress up to 31st December, 1960, in the various county districts since the end of the war.

Table 39

<i>District.</i>	<i>*No. of houses built or under construction</i>		<i>Increase since 31 Dec., 1959</i>		<i>No. of Temp. Houses completed</i>	<i>Total No. of houses built or under construct'n per 1,000 population</i>
	<i>by council</i>	<i>by private builders</i>	<i>council</i>	<i>private</i>		
Beaumaris Bor. ...	141	7	—	—	30	80.5
Amlwch Urban ...	210	53†	18	2	—	85.4
Holyhead Urban .	708	70	87	9	62	81.0
Llangefni Urban .	468	39	10	6	50	185.6
Menai B. Urban...	106	169	—	17	—	131.5
Aethwy Rural.....	325	109†	—	15	—	41.2
Twrcelyn Rural	237	199	—	40	—	52.2
Valley Rural	490	266	71	45	—	60.7
Totals	2685	912	186	134	142	69.1

*Excludes temporary houses completed.

†Includes rebuilding of war destroyed buildings.

Table 40

HOUSES (BUILT OR UNDER CONSTRUCTION) PER 1,000 POPULATION

At 31st December each year.

	1954	1955	1956	1957	1958	1959	1960
Beaumaris	73	73	72	73	73	80	81
Amlwch	52	59	67	73	75	80	85
Holyhead	35	38	61	63	67	72	81
Llangefni	143	168	178	194	190	182	186
Menai Bridge ...	72	89	97	101	115	126	132
Aethwy	30	34	35	36	38	39	41
Twrcelyn	31	34	37	39	41	47	52
Valley	31	34	37	40	44	50	61

Water Supplies

Work on the construction of the *County Water Scheme* continued during the year and the following note by the County Water Engineer gives details of the progress made :

(a) *Development during 1960*

Mainlaying was completed in the Llanfaethlu Llanrhyddlad and Rhydwyn areas. Mains were under construction in Llanfair-yng-hornwy, Rhoscolyn, and Llantrisant areas.

(b) *Lengths of main laid during 1960*

County Scheme Mains—By Contract.....17,164 lin. yards.
Routine Extensions—By Department labour.....19,674 lin. yards.

(c) *New Supplies.*

The following schedule shows the number of new supplies installed during 1960 :

<i>District.</i>	<i>No. of premises connected.</i>
Beaumaris	16
Amlwch	33
Llangefni	25
Menai Bridge	52
Holyhead	45
Aethwy	189
Twrcelyn	162
Valley	208

Fluoridation

The treatment of the Gwalchmai Zone continued without serious interruption throughout the year.

The control of the process depends on a number of independent checks :—

- (a) the volume of saturated solution fed into supply can be related to the volume of mains water pumped ;
- (b) the weight of sodium fluoride fed into the saturator can be related to the volume of mains water pumped ;
- (c) the level of fluoride in the mains water is estimated colorimetrically three times daily ;
- (d) spot samples are taken in the distribution at weekly intervals for analysis by the Government Chemist.

The results of all these checks are analysed by the Government Chemist once monthly and a report made to the County Medical Officer of Health.

These reports during 1960 showed that the level of fluoride was being maintained steadily at 0.9 to 1.0 parts per million parts of water.

Report by the County Health Officer.

“Water Supply Situation in the County

During the winter months the county main piped water supplies are sampled on the periphery of the distribution system at 14-day intervals, except for Holyhead supply, which is sampled weekly. There are 28 regular sampling points and should an unsatisfactory report be received sampling is immediately intensified in that area to discover the extent of possible pollution.

The Water Department are kept informed of all sample results as a routine measure and on receipt of information that an unsatisfactory report is to hand immediate action is taken to ensure a wholesome supply of water in the affected area.

In fixing the sampling points due regard is had for the reserve water supplies that are brought into use during peak demand periods.

Holyhead can be fed from Cefni, Trafwll and Twr Works; Cemaes has an independent supply, Plas Bach, Pentraeth is brought in to assist in the Benllech district, the borehole at Bull Bay for Am-lwch and Maelog Lake for Rhosneigr.

Routine samples of water are also taken from the private piped supplies in the county.

Table 41

BACTERIOLOGICAL RESULTS OF WATER SAMPLES PIPED WATER SUPPLIES

<i>Supply.</i>	<i>Ministry of Health Classification</i>				<i>Total</i>
	<i>I</i>	<i>II</i>	<i>III</i>	<i>IV</i>	
Cefni (County Supply)	1040	8	12	4	1,064
Cemaes	30	—	—	—	30
Total	1070	8	12	4	1094

On analysing the 16 Class III and IV samples, 7 were found in Holyhead, 6 in Rhosneigr, 1 in Llangefni, 1 in Llanfairpwll (upper village) and 1 in Beaumaris.

The Rhosneigr samples were taken during a period when the local station, normally on standby, was brought into use during the peak period of the summer. The adverse reports on the Holyhead water samples were spread over the year; 4 can be accounted for by burst mains, one by a defect in a local reservoir chlorinator, the remaining two were isolated and samples taken after flushing were satisfactory. The Llanfairpwll, Llangefni and Beaumaris samples could not be accounted for but flushing again restored the position to normal.

Complaints *re* discoloration, taste, etc., of mains water were investigated during the year and action taken where necessary.

Many farms not within reach of the main piped supplies are taking advantage of the Ministry of Agriculture, Fisheries and Food Grant Scheme to provided a water supply from local sources. Protective works around wells, springs, etc., pump houses and storage tanks are erected and the lot of the farm housewife is considerably improved by the provision of piped water for domestic use in the house.

Before the claim for grant for these water supply schemes can be paid the Ministry of Agriculture, Fisheries and Food requires a certificate from the Water Authority stating that the water is wholesome for domestic use. 30 samples of water in connection with such schemes were taken during the year.

Where water from public wells is drawn for dairy purposes the wells are inspected and samples taken to test its suitability for such use.

Of 107 samples taken from wells and springs, both public and private, 50 proved to be satisfactory and 57 not satisfactory.

The number of unsatisfactory samples may seem unduly high compared with the satisfactory results, so it should be explained that many of these are taken from wells under construction and as exploratory samples to see if wells are worth protecting or reconstructing.

The owners of a large number of houses in the rural areas where no mains supply exists are improving wells, springs, etc., with protective works, building storage tanks and piping the water into the houses to provide for full sanitary services and domestic water systems. The Improvement Grants made under the Housing Acts which are administered by the district councils have proved to be an incentive to carry out this type of work.

There are three private piped water supply schemes in the county as compared with five in 1959.

These are a military establishment, a holiday estate and a housing estate.

The water in each case receives some form of purification treatment and with the exception of the military establishment (which is under military control) the water is sampled regularly for bacteriological examination. The approximate number of people supplied by these schemes at peak periods of the year (excluding the military establishment) is 250.

During the year, with the extension of mains into the district, an estate supply and a large caravan site were connected to the main water supply.

Public Health Act, 1936—Section 138.

This section as amended by the Water Act 1945 enables the county council, by the powers delegated to them under Part IV of the Public Health Act, 1936, *inter alia*, to require the owner of a house to provide a supply of wholesome water in the house by connecting it to the local authority water mains.

The Council must be satisfied that there is not a wholesome supply of water piped into the house and that having regard to all the circumstances it is reasonable to require the owner to make the necessary provision.

As the county water supply scheme becomes available surveys of the areas supplied are made with a view to private dwellings being connected to the mains supply. Surveys of the following districts were completed during the year:

Gwalchmai, Gaerwen, Llanfairpwll.

Special attention was given to stubborn and defaulting owners who had not complied with the statutory notice under Section 138. It was possible to get compliance in most cases but enforcement procedure had to be resorted to in 39 cases.

One fact that is very apparent is the total inadequacy of the sum of £20 which is recoverable under the enforcement provisions of the section. This figure was laid down in sub-section (3) of Section 138 of the Public Health Act which was enacted in 1936 when costs were very much lower than they are today.

It is pleasing to record that a section amending sub-section (3) of Section 138, Public Health Act, 1936, is included in the Public Health (Amendment) Bill now before Parliament.

In cases where it was considered reasonable to provide a whole some supply of piped water into the houses, an informal letter was sent to the owner of the house, and, where necessary, this was followed by a statutory notice.

Since 1954, when inspection of premises under Section 138 of the Public Health Act, 1936, were commenced, to December 31st, 1960, there have been 89 cases of enforcement.

In accordance with the County Council's policy of encouraging voluntary connections to the mains, several follow up and reinspection visits were paid to the villages and districts where surveys had been completed.

These visits were intensified during the latter part of the year in order that owners should have the opportunity of connecting for a fee of £12 per house as against a connecting fee of £19 which came into operation on 1st January, 1961.

The table overleaf shows the position from the date surveys were started in May 1954 to December 31st, 1960.

Table 42

SUMMARY OF WORK DONE UNDER SECT. 138—PUBLIC HEALTH ACT, 1936

Position as at 31st December, 1960

<i>Area</i>	<i>Year insp.</i>	<i>No. of properties considered suitable for action under Sect. 138</i>	<i>No. of properties connected</i>	<i>No. of properties not connected</i>
Bodffordd	1954	23	23	—
Pentre Uchaf, Llanfairpwll	1954	16	15	1
Newborough Sect. 1.....	1954	66	59	7
Brynsiencyn	1954	43	35	8
Dwyran	1954	24	20	4
Llanddaniel	1954	37	35	2
Holland Arms & Llangaffo	1955	20	20	—
Newborough Sect. II	1955	6	6	—
Malltraeth	1955	18	17	1
Cemaes & Tregele	1955	86	83	3
Llanfechell	1955	27	21	6
Ty Croes.....	1955	38	38	—
Pencarnisiog	1955	18	18	—
Llangaffo Sect. II	1956	13	13	—
Gwalchmai Uchaf & Dothan	1956	19	19	—
Trefdraeth, Bodorgan & Hermon ...	1956	13	13	—
Llanfairpwll Sect. 1	1957	10	10	—
Amlwch Sect. 1	1956	12	11	1
Llandyfrydog	1956	2	—	2
Llanddeusant	1957	34	28	6
Llanfigael	1957	3	3	—
Llanfwrog	1957	13	11	2
Llanfachraeth & Llanyghenedl.....	1957	39	32	7
Llanfaelog	1957	17	17	—
Aberffraw	1957	17	17	—
Bodedern	1957	50	36	14
Llanerchymedd	1957	88	50	38
Llanfairpwll Sect. II	1958	8	8	—
Bodorgan School to A5.	1958	9	7	2
Rhostrehwfa—Corn Hir	1958	8	5	3
Cefn Uchaf—Tai Lawr	1959	6	6	—
Glanrafon	1959	16	10	6
Carmel—Trefor	1959	12	6	6
Bryngwran & Capel Gwyn	1959	30	4	26
Caergeiliog	1959	13	4	9
Holyhead	1959/60	9	4	5
Llanfairpwll Sect. III	1960	64	—	64
Gwalchmai	1960	30	13	17
Gaerwen	1960	21	7	14
Totals.....		971	717	254

The figures in the column "No. of properties considered suitable for action . . ." vary from year to year. This is due to deletions (for instance when two houses are converted into one or houses are closed voluntarily by the owner) or additions (as when a house listed for demolition is reconstructed and connected to the main supply of water). Many of the houses in the "not connected" column are awaiting sanction for Improvement Grants, while others are vacant and therefore not actionable.

Well Water Supplies.

Since the County Council took over the public wells on 1st October, 1954, 29 have been closed for various reasons and replaced by main piped supplies.

Many public wells are gradually falling into disuse in districts as an increasing number of houses connect to local authority main water supplies. The number of public wells stands at 330, which includes some of those mentioned above.

The work of routine inspection of the wells is carried out jointly with the Water Department Inspectors.

Special visits are made on receipt of complaints and any repairs or renewals are put in hand as soon as possible.

In districts where it is not expected to lay main supplies in the foreseeable future, works of improvement are being carried out on public wells as occasion arises.

I WYNN JONES."

Food Hygiene Regulations.

No prosecutions were instituted by the council under the above regulations during 1960. Liaison is maintained with the sanitary authorities whereby any apparent infringements of the regulations observed by members of the council's staff are brought to the notice of the public health inspector of the district concerned.

Sewage Disposal

I am indebted to my colleagues in the county districts for the following information as to the position at the end of 1960 :

Llangefni U.D.

The new sewerage scheme to serve the urban district was brought into operation in December 1960. Extensions of main sewers to the Rhosmeirch, Penmynydd Road and Clai Road areas were put in hand during 1960.

Menai Bridge U.D.

A report was submitted in 1960 by the consulting engineers on the sewerage system of the urban district.

Beaumaris Borough.

Detailed plans for the improvement of the council's sewerage and sewage disposal system were finalised during the year and a Local Enquiry was held in June. However the Clean Rivers (Estuaries and Tidal Waters) Act, 1960, which came into force in August, 1960 applied the 1951 Act to the Menai Straits and as a result a further enquiry became necessary. The year closed awaiting a date for this enquiry.

Aethwy R.D.

Individual house connection to the public sewers continued to be made in 1960 in the villages of Brynsiencyn, Newborough and Star, Penmynydd.

Constructional work started on the scheme to serve Gaerwen and Holland Arms.

Schemes to serve Dwyran and upper Llanfairpwll had reached a stage where construction could be started, it is hoped, in 1961.

The public enquiry into the Malltraeth scheme (to serve also Hermon and Bethel) should be held in 1961.

The council have taken the initial steps in connection with schemes to serve Llandegfan.

West Holyhead Scheme.

Construction started in 1960.

Twrcelyn R.D.

Schemes to serve Moelfre, Benllech and Llanerchymedd were under construction in 1960.

Amlwch U.D.

Nothing to report.

Valley R.D.

- (a) *Gorad, Caergeiliog and Llanfechell*: Under construction
- (b) *Llanddeusant*: At the turn of the year the Council's Engineer had constructed scheme proposals.
- (c) *Gwalchmai*: Completed.
- (d) *Rhostrebwfa*: Completed.
- (e) *Valley and Four Mile Bridge*: Completed.
- (f) *Llanfaethlu*: Under construction. Almost completed.
- (g) *Llanfachraeth*: Under construction.
- (h) *Llanrhyddlad and Rhydwyn*: In the report stage.
- (i) *Trearddur Bay*: Extensions in the report stage.

APPENDIX "A."

CONSTITUTION OF HEALTH COMMITTEE, YEAR 1960-61

Chairman : J. F. Chadwick, Esq., B.A., M.C.

Vice-Chairman : Hugh Jones, Esq., J.P.

The Marquess of Anglesey.	*Dr. W. Parry-Jones.
Mrs. M. A. Edwards	Mr. R. J. Jones.
*Miss I. Johnston.	Mr. T. Grey Jones.
Mrs. Walter O. Jones, J.P.	Mr. T. O. Jones.
Mrs. J. Morris.	Mr. W. P. Jones.
Mrs. E. G. Williams, J.P.	Mr. W. Charles Owen.
*Mr. Frank Bell.	Mr. Griffith Pritchard.
Sir Wynne Cemlyn-Jones.	Mr. Hugh Pritchard.
Mr. R. Edwards.	Mr. Edgar Robens.
*†Mr. O. Glynn Foulkes.	Mr. Robert Roberts, M.B.E., J.P.
*Mr. D. A. Godfrey, L.D.S., R.C.S.	Mr. John Roberts.
Mr. R. Gray	Mr. D. Thomas.
Mr. Owen Griffith.	†Mr. J. Hugh Thomas, O.B.E.
Rev. J. D. Griffith.	Mr. William Thomas.
*Dr. T. Alun Griffith, J.P.	Rev. D. J. M. Williams.
Mr. R. Ll. Hughes.	Mr. Gordon Williams.
Rev. D. R. Hughes	*Prof. O. Herbert Williams, F.R.C.S.
Mr. W. Iorwerth Jones.	
*Mr. Iorwerth Jones.	
*Mr. J. Howell Hughes, M.D., F.R.C.S.	
Mr. O. T. Lloyd Huws.	
Mr. A. Ifan Jones, M.B.E., J.P.	
Mr. Llewelyn W. Jones, M.P.S.	
Dr. Leslie W. Jones.	
Mr. W. Parry Jones.	

*Co-opted members.

†Ex-officio.

APPENDIX "B."

STAFF OF THE COUNTY HEALTH DEPARTMENT

County Medical Officer of Health,
Principal School Medical Officer
and County Welfare Officer.

G. Wynne Griffith, M.D., D.P.H.

Assistant County Medical Officers of
Health and School Medical Officers. †

G. H. Browse Roberts, M.A., M.B., BCh.,
B.A.O., D.P.H., L.M.

Mrs. Mair Humphreys-Jones, M.B., Ch. B.
C.P.H. (Part-time)

Principal Dental Officer

† W. Arthur Jones, L.M.S.S.A., D.P.H.
H. Levison, B.D.S., L.D.S. and F.D.S.,
R.C.S. (Eng.)

Dental Officers.

Dr. Catherine M. Rolant Thomas,
M.R.C.S., L.R.C.P., L.D.S. (Left 31.8.60)

Elwyn Jones, L.D.S.

H. W. Evans, B.D.S. (Commenced
29/8/60).

Dental Attendants.

Mrs. Gwen Davies (*nee* Jones)

Miss Pat Randall. (Left 30/9/60).

Miss S. M. Williams.

Miss M. A. Underhill. (Commenced
19/10/60).

Consulting Obstetricians.

* O. Vaughan Jones, M.D., F.R.C.S.,
F.R.C.O.G.

* W. Macfarlane, M.B., Ch.B., M.R.C.O.G.

Consulting Paediatrician.

* Gwyn R. Griffith, M.D., F.R.C.P.,
D.P.H., D.C.H.

Chest Physician.

* J. Glyn Jones, M.A., M.D., B.Chir.,
M.R.C.S., L.R.C.P.

Consulting Ophthalmologists.

* G. C. Laszlo, M.D., L.R.C.P., D.O..

* T. G. Wynne Parry, M.R.C.S., L.R.C.P.,
D.O.M.S.

Consulting Orthopaedic Surgeons.

* Prof. B. L. McFarland, M.D., M.Ch.
(Orth.), F.R.C.S.

* G. I. Roberts, M.B., Ch.B., M.Ch.(Orth.)
F.R.C.S.

Consulting Venereologist.

* H. Vernon Williams, M.R.C.S., L.R.C.P.

† Also part-time District Medical Officers of Health.

* Under contract with Regional Hospital Boards.

Mental Welfare Officers

**T. L. Jones, 7 Corn Hir, Llangefni. (Tel. Llangefni 2254).

**W. A. Pretty, Fair View, Llanfairpwll. (Tel. Llanfairpwll 241).

**J. Roberts, Hafanedd, Spencer Road, Valley. (Tel. Valley 318).

†H. Betts, D.P.A., 39 Pennant, Llangefni.

†R. J. Jones, Bryn Meini Farm, Llanfaelog (Tel. Rhosneigr 442) (Full time from 17/10/60).

** Also District Welfare Officers.

† Relief.

County Health Officer.

I. Wynn Jones, M.A.P.H.I.

ADMINISTRATIVE STAFF

Chief Administrative Assistant

Horace Betts, D.P.A.

Clerical Staff.

Maldwyn Jones.

Mrs. E. Griffith.

R. J. Jones (To 17/10/60).

Miss H. A. Roberts.

Miss E. M. Jones.

Miss O. Ll. Edwards.

Mrs. M. J. Floukes. (Left 31/12/60).

Miss J. Owen.

Deputy Ambulance Officer.

W. T. Rowlands.

Administrative Assist. (Welfare)

Mrs. Gladys Griffith.

ASSOCIATED OFFICERS OF THE COUNTY COUNCIL.

Clerk of the County Council.

William Jones, O.B.E. (To 16/1/61).

Idris Davies, LL.B. (From 17/1/61).

County Architect.

N. Sq. Johnson, A.R.I.B.A., A.M.T.P.I.

County Treasurer.

A. I. Peake, F.I.M.T.A.

Inspector of Food and Drugs.

H. A. Thomas, M.I.W.M.A.

Public Analyst.

Harold Lowe, M.Sc., F.R.I.C. (Deceased July, 1960).

J. G. Sherrat, B.Sc., F.R.I.C. (From 1/11/60).

Children's Officer.

Miss M. Rowland.

County Water Engineer.

W. H. Austin, B.Sc., (Eng.) M.I.C.E., M.I.W.E. (To February, 1960.)

A. B. Groves, B.Sc. (Hons.), M.I.C.E. M.I.W.E. (From 1/4/60).

NURSING STAFF.

Superintendent Nursing Officer.

Miss Hilda V. Parry, S.R.N., S.C.M., Q.N., H.V.Cert.

Deputy Supt. Nursing Officer.

Miss J. E. Jones, S.R.N., S.C.M., Q.N., H.V.Cert.

Health Visitors.

*Mrs. G. Rowlands.

*Miss E. C. Pritchard.

*Miss M. C. Williams.

*Mrs. L. M. Griffiths (Left 31/5/60). (Part-time temporary).

*Miss A. Williams.

*Miss E. E. Hughes. (Left 31/1/60).

*Miss E. Hughes.

*Mrs. M. M. Williams. (Temporary).

*Miss M. E. Gravelle.

Mrs. B. Williams.

*Miss G. Foulkes. (From 1/6/60).

*Miss E. M. Davies. (From 24/9/60).

*Also School Nurses.

District Nurse/Midwives.

Nurse C. Davies, Gesail Gam, Llanddaniel (Tel. Gaerwen 667).

Nurse A. Evans, 15 Rose Hill, Beaumaris, (Tel. Beaumaris 83).

Nurse E. M. Hughes, 7 Pennant, Llangefni. (Tel. Llangefni 3208).

Nurse E. Wyn Hughes, Llain Nest, Newborough. (Tel. Newborough 213).

Nurse E. Jones, Tyddyn Ball, Llanfechell. (Tel. Cemaes Bay 247).

Nurse P. Lloyd, Bryn, Holyhead. (Tel. Holyhead 2029).

Nurse P. M. Murphy, Ty Ceiliog, Beaumaris. (Tel. Beaumaris 96)

Nurse E. Parry, Haulfre, Bethesda Street, Amlwch. (Tel. Amlwch 396).

Nurse G. Price, Gwynant, Penrhos, Holyhead. (Tel. Holyhead 2700).

Nurse E. Helsby Hughes, Ty'n Rhos, Penysarn. (Tel. Amlwch 574).

Nurse W. M. Roberts. (Left 14/7/60).

Nurse S. Owen, Bodrewyn, Cleveland Ave., Holyhead. (Tel. Holyhead 2578).

Nurse E. Vidler. (Left 23/7/60).

Nurse D. Williams, 7, Pennant, Llangefni. (Tel. Llangefni 3208).

Nurse L. Williams, 4 High Street, Menai Bridge. (Tel. Menai Bridge 100).

Nurse A. M. Parry, Cartref, Bodedern. (Tel. Valley 246).

Nurse Mair Shakeshaft (*nee* Jones), Brigg-y-Don, Benllech. (Tel. Tyn-y-gongl 359).

Nurse K. Jones, Tyddyn Herbert, Llanerchymedd. (Tel. Llaner'm'dd 224). (Commenced 1/5/60).

Nurse E. M. Davies, Gwynant, Llangefni. (Tel. Llangefni 3323). Commenced 26/1/60).

OTHER STAFF

Matrons—Homes for the Aged.

Llys-y-Gwynt.

Park Mount.

Garreglwyd.

Home Teacher for the Blind.

Supervisor of Training Centre.

Miss Sarah E. Williams.

Miss Ellen Jones, S.R.N., S.C.M.

Mrs. E. M. Williams, S.R.N.

Miss Dilys Jones.

Mrs. Mabel Wilson, J.P.

APPENDIX "C."

PRESENT ARRANGEMENTS AT ANTE-NATAL CLINICS.

<i>Clinic</i>	<i>Time</i>	<i>Place where held</i>	<i>Days when held in month</i>
AMLWCH	2 p.m.	Glanrafon	2nd and 4th Thursday
HOLYHEAD	2 p.m.	St. David's Priory	Every Wednesday
LLANGFNI	2 p.m.	Isgraig Clinic.	1st and 3rd Thursday.

PRESENT ARRANGEMENTS AT INFANT WELFARE CENTRES.

<i>Name of Centre</i>	<i>Place where held</i>	<i>Days when held in month</i>
AMLWCH	Court Room	1st and 3rd Thursday
ABERFFRAW	Village Hall	1st and 3rd Tuesday
BEAUMARIS	The Old Gaol	1st and 3rd Thursday
CEMAES BAY	Village Hall	2nd and 4th Wednesday
GWALCHMAI	Village Hall	1st and 3rd Tuesday
HOLYHEAD	St. David's Priory	2nd and 4th Thursday
LLANGFNI	Isgraig Clinic	2nd and 4th Thursday
LLANFAETHLU	Coffee House	2nd and 4th Friday
LLANFAIRPWLL	Presbyterian Church	2nd and 4th Friday
MARIANGLAS	Old British School	1st and 3rd Monday
MENAI BRIDGE	4 High Street	1st and 3rd Thursday
NEWBOROUGH	Memorial Hall	1st and 3rd Wednesday
VALLEY	Court Room	2nd and 4th Monday

APPENDIX "D."

AREA POPULATION, BIRTHS, DEATHS FOR 1960

<i>District.</i>	<i>Area in Acres</i>	<i>Population.</i>				
		<i>Census 1931</i>	<i>Census 1951</i>	<i>Mid-year 1960</i>	<i>Live Births</i>	<i>Deaths</i>
Amlwch	4,494	2,562	2,700	3,080	50	37
Beaumaris	3,135	1,710	2,128	2,210	31	27
Holyhead	730	10,700	10,569	10,370	234	143
Llangefni	2,510	1,782	2,225	3,000	72	28
Menai Bridge	824	1,675	1,855	2,090	33	31
Urban	11,693	18,429	19,477	20,750	420	266
Aethwy	52,352	10,765	10,434	10,520	145	157
Twrcelyn	53,865	8,644	8,569	8,350	119	122
Valley	58,784	11,191	12,157	12,450	202	174
Rural	165,001	30,600	31,160	31,320	466	453
Anglesey	176,694	49,029	50,637	52,070	886	719

ANNUAL RATES PER 1,000 ESTIMATED POPULATION

<i>District</i>	<i>Birth Rate</i>	<i>Death Rate for</i>				
		<i>All Causes</i>	<i>Phthisis</i>	<i>Respir- atory Diseases</i>	<i>Cancer</i>	<i>Heart Disease</i>
Amlwch	16.2	12.0	0.0	1.3	0.6	3.6
Beaumaris	14.0	12.2	0.0	0.4	2.3	4.5
Holyhead	22.5	13.7	0.1	0.9	1.8	4.0
Llangefni	24.0	9.3	0.0	0.0	1.3	4.3
Menai Bridge	15.8	14.8	0.0	0.0	2.4	4.8
Urban	20.2	12.8	0.1	0.7	1.7	4.1
Aethwy	13.8	14.9	0.2	0.7	3.2	4.6
Twrcelyn	14.2	14.6	0.2	1.0	3.1	3.0
Valley	16.2	14.0	0.2	0.6	1.8	4.5
Rural	14.9	14.5	0.2	0.8	2.6	4.1
Anglesey	17.0	13.8	0.1	0.7	2.3	4.1

INFANT DEATHS—STILLBIRTHS—MATERNAL DEATHS

<i>District</i>	<i>Infant Deaths</i>		<i>Stillbirths</i>		<i>Maternal No.</i>	<i>Deaths Rate**</i>
	<i>No.</i>	<i>Rate*</i>	<i>No.</i>	<i>Rate**</i>		
Amlwch	2	40.0	—	0.0	—	0.0
Beaumaris	—	0.0	1	31.2	—	0.0
Holyhead	7	29.9	4	16.8	1	4.2
Llangefni	2	27.8	2	27.0	—	0.0
Menai Bridge	—	0.0	—	0.0	—	0.0
Urban	11	26.2	7	16.4	1	2.3
Aethwy	1	6.9	1	6.9	—	0.0
Twrcelyn	2	16.8	4	32.5	—	0.0
Valley	2	9.9	5	24.1	—	0.0
Rural	5	10.7	10	21.0	—	0.0
Anglesey	16	18.1	17	18.8	1	1.1

* per 1,000 live births.

** per 1,000 births (live and still).

